

PRISONER'S CIVIL RIGHTS COMPLAINT (Rev. 05/2015)

IN THE UNITED STATES DISTRICT COURT
FOR THE SOUTHERN DISTRICT OF TEXAS
HOUSTON DIVISION

United States Courts
Southern District of Texas
FILED

AUG 31 2018

David J. Bradley, Clerk of Court

Ivory Johnson #02358381

Plaintiff's Name and ID Number

Harris County Jail, 701 N. San Jacinto, Hou. Tx. 77002

Place of Confinement

CASE NO. _____

(Clerk will assign the number)

v.

Harris County Jail, 701 N. San Jacinto, Hou. Tx.

Defendant's Name and Address

Waller County Jail, In Waller County, Texas.

Defendant's Name and Address

Defendant's Name and Address

(DO NOT USE "ET AL.")

INSTRUCTIONS - READ CAREFULLY

NOTICE:

Your complaint is subject to dismissal unless it conforms to these instructions and this form.

1. To start an action you must file an original and one copy of your complaint with the court. You should keep a copy of the complaint for your own records.
2. Your complaint must be legibly handwritten, in ink, or typewritten. You, the plaintiff, must sign and declare under penalty of perjury that the facts are correct. If you need additional space, **DO NOT USE THE REVERSE SIDE OR BACK SIDE OF ANY PAGE.** ATTACH AN ADDITIONAL BLANK PAGE AND WRITE ON IT.
3. You must file a separate complaint for each claim you have unless the various claims are all related to the same incident or issue or are all against the same defendant, Rule 18, Federal Rules of Civil Procedure. Make a short and plain statement of your claim, Rule 8, Federal Rules of Civil Procedure.
4. When these forms are completed, mail the original and one copy to the clerk of the United States district court for the appropriate district of Texas in the division where one or more named defendants are located, or where the incident giving rise to your claim for relief occurred. If you are confined in the Texas Department of Criminal Justice, Correctional Institutions Division (TDCJ-CID), the list labeled as "VENUE LIST" is posted in your unit law library. It is a list of the Texas prison units indicating the appropriate district court, the division and an address list of the divisional clerks.

FILING FEE AND *IN FORMA PAUPERIS* (IFP)

1. In order for your complaint to be filed, it must be accompanied by the statutory filing fee of \$350.00 plus an administrative fee of \$50.00 for a total fee of **\$400.00**.
2. If you do not have the necessary funds to pay the fee in full at this time, you may request permission to proceed *in forma pauperis*. In this event you must complete the application to proceed *in forma pauperis*, setting forth information to establish your inability to prepay the fees and costs or give security therefor. You must also include a current six-month history of your inmate trust account. If you are an inmate in TDCJ-CID, you can acquire the application to proceed *in forma pauperis* and the certificate of inmate trust account, also known as *in forma pauperis* data sheet, from the law library at your prison unit.
3. The Prison Litigation Reform Act of 1995 (PLRA) provides "...if a prisoner brings a civil action or files an appeal *in forma pauperis*, the prisoner shall be required to pay the full amount of a filing fee." See 28 U.S.C. § 1915. Thus, the court is required to assess and, when funds exist, collect, the entire filing fee or an initial partial filing fee and monthly installments until the entire amount of the filing fee has been paid by the prisoner. If you submit the application to proceed *in forma pauperis*, the court will apply 28 U.S.C. § 1915 and, if appropriate, assess and collect the entire filing fee or an initial partial filing fee, then monthly installments from your inmate trust account, until the entire \$350.00 statutory filing fee has been paid. (The \$50.00 administrative fee does not apply to cases proceeding *in forma pauperis*.)
4. If you intend to seek *in forma pauperis* status, do not send your complaint without an application to proceed *in forma pauperis* and the certificate of inmate trust account. Complete all essential paperwork before submitting it to the court.

CHANGE OF ADDRESS

It is your responsibility to inform the court of any change of address and its effective date. Such notice should be marked "**NOTICE TO THE COURT OF CHANGE OF ADDRESS**" and shall not include any motion for any other relief. Failure to file a NOTICE TO THE COURT OF CHANGE OF ADDRESS may result in the dismissal of your complaint pursuant to Rule 41(b), Federal Rules of Civil Procedure.

I. PREVIOUS LAWSUITS:

- A. Have you filed *any* other lawsuit in state or federal court relating to your imprisonment? YES ☒ NO
- B. If your answer to "A" is "yes," describe each lawsuit in the space below. (If there is more than one lawsuit, describe the additional lawsuits on another piece of paper, giving the same information.)
 1. Approximate date of filing lawsuit: N/A
 2. Parties to previous lawsuit:

Plaintiff(s) N/A

Defendant(s) N/A
 3. Court: (If federal, name the district; if state, name the county.) N/A
 4. Cause number: N/A
 5. Name of judge to whom case was assigned: None
 6. Disposition: (Was the case dismissed, appealed, still pending?) N/A
 7. Approximate date of disposition: N/A

II. PLACE OF PRESENT CONFINEMENT: Harris County Jail, 701 N. San Jacinto, Hou. Tx. 77002

III. EXHAUSTION OF GRIEVANCE PROCEDURES:

Have you exhausted all steps of the institutional grievance procedure? ☒ YES ☐ NO

Attach a copy of your final step of the grievance procedure with the response supplied by the institution.

IV. PARTIES TO THIS SUIT:

A. Name and address of plaintiff: Ivory Johnson #02358381, 701 N. San Jacinto
4 B-3, Houston Tx. 77002

B. Full name of each defendant, his official position, his place of employment, and his full mailing address.

Defendant #1: Harris County Jail, in Harris County, Texas.

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Allowing Detention Officers to operate in such a fashion, creating negligence, 8th Amend. Violation

Defendant #2: Detention Officer Parra

Assaulted me by an excessive use of force, as well as striking me with an open hand.

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Causing me to feel unsafe within my person, leading to pain and discomfort.

Defendant #3: Sgt. Thompson

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Allowed me to be placed back into a cell block, after I notified him of threats made to me.

Defendant #4: Waller County Jail, in Waller County County, Texas

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

Allowed Deputy's, as well as jail to enact upon negligence, all while assaulting the Plaintiff.

Defendant #5: _____

Briefly describe the act(s) or omission(s) of this defendant which you claimed harmed you.

V. STATEMENT OF CLAIM:

State here in a short and plain statement the facts of your case, that is, what happened, where did it happen, when did it happen, and who was involved. Describe how each defendant is involved. You need not give any legal arguments or cite any cases or statutes. If you intend to allege a number of related claims, number and set forth each claim in a separate paragraph. Attach extra pages if necessary, but remember the complaint must be stated briefly and concisely. IF YOU VIOLATE THIS RULE, THE COURT MAY STRIKE YOUR COMPLAINT.

On or about August 8th, 2018, I send in an inmate request form; to a detention officer, in 7F1. In regards to threats made; concerning my safety and well being. No action was taken by Harris County Jail's staff. The situation proceeded until August 9th, 2018, being still assigned to aforementioned cell block, I was removed, and placed into a holding cell; on the 7th Floor, near the F.C.I., Sgt. Thomson, whom I'd spoken to, ordered me to remove my shirt, for no specific reason; then notified me I was being transferred. I was placed inside 7B, in a cell for 12 hrs, then transferred back to 7F1, then I was assaulted by another inmate; one of several whom threaten me. I was then on August 11th, 2018, placed in a holding cell for 12 hrs. Then taking me back to 7F1, on 8/12/18, then multiple pre-trial detainee's physically assaulted me. Being then handcuffed, I removed by Detention Officer Para, taken medical in 701 Infirmary. In the mist of being drugged, I sat on the floor, D.O. Para used excessive force by hitting me, pushed me into a chair in 701's infirmary; causing me to feel unsecure, as well as pain and discomfort.

VI. RELIEF:

State briefly exactly what you want the court to do for you. Make no legal arguments. Cite no cases or statutes.

I'm seeking 1,000,000.00 in compensation, for both mental anguish of the physical assaults due to the negligence imposed by Harris County Jail employee's; in violation of State and Federal guidelines, Civil Rights. And court fees as to potential fines charged to Defendants.

VII. GENERAL BACKGROUND INFORMATION:

A. State, in complete form, all names you have ever used or been known by including any and all aliases.

Ivory Johnson

B. List all TDCJ-CID identification numbers you have ever been assigned and all other state or federal prison or FBI numbers ever assigned to you.

None

VIII. SANCTIONS:

A. Have you been sanctioned by any court as a result of any lawsuit you have filed? YES ☐ NO ☒

B. If your answer is "yes," give the following information for every lawsuit in which sanctions were imposed. (If more than one, use another piece of paper and answer the same questions.)

1. Court that imposed sanctions (if federal, give the district and division): N / A

2. Case number: None

3. Approximate date sanctions were imposed: N / A

4. Have the sanctions been lifted or otherwise satisfied? YES ☐ NO ☒

GROUND ONE:

Continuance of the initial complaint filed, on 42 U.S.C.A 1983.

Claim against Waller County Jail, In Waller County, Tx. Number 2 Defendants

FACTS SUPPORTING GROUND ONE:

Waller County Jail, in Waller County, Tx.; enacted upon negligence. From numerous
attempts for me, seeking help, from it's staff; in regards to threats from
pretrial detainee's. This ultimately led to a cruel and unusual punishment
inflicted upon me, by Waller County Jail's staff, as well as the pretrial detainees.

The staff of Waller County Jail, ignored my attempted contacts for help, from
alleged threats; moreover, I sustain physical pain from these assaults; mental
anguish from negligence on behalf of Waller County Jail. Furthermore, I'm being
denied access to the Courts by Harris County Jail. Being that, outcome of the
Grievance filed by me, against Waller County Jail, is in my property; from being trans-
ported to Harris County Jail; denied me access to these documents. Further violating
my Civil Rights, as defined by the United States Constitution. All this occurred
on or about the 15th of March, 2018, from Harris County Jail & Waller County
Jail my problem has been organized Thru Sergeant, Detention Officers, & pretrial detainees.

C. Has any court ever warned or notified you that sanctions could be imposed? _____ YES ☒ NO

D. If your answer is "yes," give the following information for every lawsuit in which a warning was issued. (If more than one, use another piece of paper and answer the same questions.)

1. Court that issued warning (if federal, give the district and division): None
2. Case number: N/A
3. Approximate date warning was issued: None

Executed on: 8/29/18
DATE

Ivory Johnson
[Signature]
(Signature of Plaintiff)

PLAINTIFF'S DECLARATIONS

1. I declare under penalty of perjury all facts presented in this complaint and attachments thereto are true and correct.
2. I understand, if I am released or transferred, it is my responsibility to keep the court informed of my current mailing address and failure to do so may result in the dismissal of this lawsuit.
3. I understand I must exhaust all available administrative remedies prior to filing this lawsuit.
4. I understand I am prohibited from bringing an *in forma pauperis* lawsuit if I have brought three or more civil actions or appeals (from a judgment in a civil action) in a court of the United States while incarcerated or detained in any facility, which lawsuits were dismissed on the ground they were frivolous, malicious, or failed to state a claim upon which relief may be granted, unless I am under imminent danger of serious physical injury.
5. I understand even if I am allowed to proceed without prepayment of costs, I am responsible for the entire filing fee and costs assessed by the court, which shall be deducted in accordance with the law from my inmate trust account by my custodian until the filing fee is paid.

Signed this 29 day of August, 20 18.
(Day) (month) (year)

Ivory Johnson
[Signature]
(Signature of Plaintiff)

WARNING: Plaintiff is advised any false or deliberately misleading information provided in response to the above questions may result in the imposition of sanctions. The sanctions the court may impose include, but are not limited to, monetary sanctions and the dismissal of this action with prejudice.

GRIEVANCE RECEIPT

INMATE GRIEVANCE BOARD

701

To: IVORY JAMES

JOHNSON

Grievance Received

8/20/2018

SPN# 2358381

From: Inmate Grievance Board

Ref: GRIEVANCE # 209443

ADMIN SERVICES DIVISION

The Inmate Grievance Board has received a grievance from Inmate

IVORY JAMES JOHNSON

Upon completion of your investigation, check the appropriate finding and provide the Inmate with this
Grievance Receipt.

I have investigated this grievance and determined it to be:

 Unfounded

 Founded/Resolved

 Founded/Unresolved

 ATW/TDC

 ✓ OIG/IAD or Bureau Investigation

Grievance Receipt

Inmate Copy

Grievances with an Unfounded or Founded/Resolved determination may be appealed to the
Grievance Board. Appeals must be in writing and submitted within (5) five working days of
the investigating supervisor's decision (excluding holidays).

Grievance Receipt was Delivered to Inmate JOHNSON

on Date: 8/21/18

Supervisor's printed name: Sgt. C. Lee

Supervisor's Signature: [Signature]

Date: 8/21/18


Affidavit

Before me, the undersigned authority personally appeared Ivory Johnson (your name), who duly sworn, deposed as follows: My name is Ivory Johnson, I am over 18 years of age, competent to make this affidavit and personally acquainted with the facts herein stated: **(in the following space write the facts/your statement)**

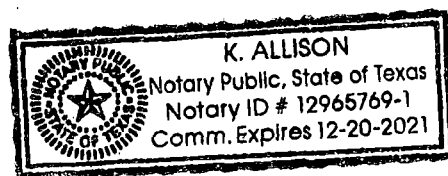
Plaintiff's Supporting Affidavit

In accordance to Rule 166(c), of Vernon's Ann. Tex. Civil Practice
This affidavit is in support the Complaints, stated in my civil Action,
"Deemed True and Correct," to the best of my knowledge. As to the facts
stated, in the regards to the civil Rights Violations defined by Ivory Johnson, As To the
42 U.S.C.A § 19.83, Pertaining to all Defendants alleged within this
Civil Action, whom Assaulted me on 8/12/18, physically, causing me pain, and discomfort,
but not limited to mental anguish.

The facts stated here are voluntary.


Affiant (Your Signature)

Sworn and Subscribed before me on the 29 day of Aug, 20 18




Notary Public In and for
The State of Texas